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ASSESSMENT OF CULTURAL ORIENTATION

Richard Dana, Ph.D.

Dr. Stephens (1992) described several unstated realities to be considered when assessing ethnic minorities. I will amplify a clinical issue which she has articulated; this is the level of acculturation and its assessment. It is critical to distinguish between assimilated, traditional (those who retain original culture), bicultural (competent in original and adopted culture), and marginal orientations (don't fit into original or adopted culture).

Assessment must begin with a style of service-delivery that differs for each ethnic minority group. If the assessor can do this, then a task orientation can occur that is necessary for an evaluation of cultural orientation and selection of assessment procedures. Knowledge of cultural orientation prior to the assessment process is necessary in order to select instruments and to clarify interpretations. Since within-group differences are as great as between-group differences, no valid assumptions may be made concerning cultural orientation on the basis of physical appearance or surname.

Many tests can do disservice to persons with traditional cultural orientations by caricaturing, dehumanizing, or pathologizing them. Nonetheless, psychometric establishment representatives have repeatedly stated that norms based on matching of socio-demographic variables are sufficient to ensure fairness. This statement applies only to some of those persons who may be accurately described by these variables. Such matching often will be spurious since a relatively small number of ethnic minority persons are affluent, educated, and in professional/business occupations as, for example, the MMPI-2 standardization requires. There is never any matching for world view

dimensions of values. Matching for perceptions of health/illness, perceptions of relevant interventions, and for credible providers are very important. Current matching does ensure that the minority persons included in the standardization are assimilated in their cultural orientation. For these persons, existing standard tests are appropriate and useful. Roger Greene has discovered that almost all of the group comparison research has been plagued by statistical errors, disagreement on what constitutes ethnic group membership, and that there has been an absence of socioeconomic comparative criteria.

It is necessary for the assessor to decide whether to obtain acculturation information by direct questioning, use of an interview format, or an existing instrument. A checklist of acculturation information has been provided that begins with "willingness to acculturate". Group, sociocultural, and individual psychological components as well as acculturation phase or stage are included (Dana, 1992). This checklist is useful for assessment of refugees, immigrants, and sojourners whose first language is not English and for whom a bilingual, bicultural translator may be required.

For persons who have considerable first-hand living experience in the United States and are fluent English speakers, a direct measure of cultural orientation will be appropriate. These measures generally contain multidimensional information for factors of language proficiency/preference, culture-specific attitudes and value orientation, and socioeconomic status as described by Esteban Olmedo in 1979. The measures are either mono-level estimates of the extent to which an original or traditional culture has been retained or bi-level estimates of both original culture retention and acquisition of dominant society values and behaviors. The more recent measures are predominately bi-level. There are also several measures of world view components designed for use across all

ethnic minority groups. The remainder of this paper will suggest the status of cultural orientation measurement for four of the major ethnic minority groups in this country.

African Americans

There are no reliable statistics on the relative number of African Americans who are assimilated or retain some of their African heritage. Retention of this heritage has provided a strong resource for coping with prejudice, discrimination, exploitation, and racism. Instruments to measure Nigrescence, the process of becoming aware of African-American identity, and Afrocentrism/Africentrism, or African self-consciousness, have been developed and have received some validation. Nigrescence measures have been used to demonstrate cultural variance in MMPI scale elevations of F, 6, 8, and 9. Professional opinion would probably be divided on the current usefulness of these instruments. Nonetheless, assessors in this generation are going to have to use the MMPI--for better or for worse--and a correction for culture, whenever necessary, is better than a culture-personality confound (although not much better). The Eurocentric test construction of the MMPI and similar diagnostic instruments, the Anglo American culture-specific focus of the DSM, and the Anglo American professional tendency to minimize cultural differences all contribute to a less than fair opportunity for MMPI assessment of African Americans. Therefore, these moderator test variables merit a continuing validation enterprise that includes norms for different populations of African Americans developed with attention to age, gender, urban-rural residence, and education/occupation. Only in this way can the constructs of Nigrescence and Afrocentrism be used responsibly as correction factors for standard psychological tests. In addition to these constructs, culture-specific personality theory is now a mandatory frame of reference for psychological test interpretation. Rorschach, TAT, and MMPI case studies of persons high and

low on Afrocentrism could provide an impetus to applications of African American personality theory developed by Joseph Baldwin, Adelbert Jenkins, and Shelby Steele, among others.

Asian Americans

The 1980 census reported 32 different Asian groups in this country. There is very little assessment-relevant literature for Asian Indians, Koreans, and Filipinos who will soon be the numerically dominant groups in this country. Fluency in English can mask cultural differences in perceptions/expectations for services. The existing moderator variables for particular Asian groups cannot be recommended for use at this time. However, one pan-Asian measure developed by Richard Suinn and Sandra Lew should be examined carefully by assessors. In addition, two non-group-specific measures of world view--Scale to assess World Views; (Multicultural Acculturation Scale)--and the Individualism-Collectivism Scale are available for use with Asian groups, although assessors should have an extensive knowledge of the specific Asian cultures of their clients in order to use these moderators appropriately.

Hispanic Americans

There are many moderators with good psychometric properties available for use with Hispanic Americans. These measures are both mono-level and bi-level and have been developed for Mexican American and Cuban-American adults, adolescents, and children. One of the earliest instruments, the mono-level Acculturation Rating Scale for Mexican Americans clearly indicated an MMPI culture-psychopathology confound for scales F, 7, 8, 9. The sophisticated measures developed by Richard Mendoza and Manuel Ramirez III are the most useful because they demand assessor knowledge of Mexican American culture, history, personality, and research literature. These measures provide more than classification of an assessee's cultural orientation.

Whenever classification per se is the only information required, the Hispanic Acculturation Scale, may be used.

Native American

Very few Native Americans in a college population are assimilated (e.g., <10%). A possible reason for this statistic is the extreme difference between Native American and Anglo American world views and the determination of many individuals to retain their culture as a bulwark against assimilation or genocide. Tribe-specific mono-level or bi-level acculturation indices are available for many tribes as a result of research on specific tribes by anthropologists. These measures vary in number of component variables, psychometric sophistication, and form of administration. The most sophisticated measures have been developed for reservation Sioux; tribe-specific measures are to be preferred for reservation residents. Pan-Indian measures are probably preferable for urban residents from all tribes. Since Native Americans, regardless of tribe or DSM psychopathology have obtained similar elevated MMPI profiles, responsible assessment should always include moderator information on cultural orientation. It should be noted that some authors have suggested an additional transitional cultural orientation for Native Americans.

Although there are many available measures in test format, assessors should consider the merits of collecting cultural orientation information in the context of an interview. This increases the likelihood of obtaining relevant data. An assessor, regardless of cultural competence, who is not known to the client prior to assessment and who, in addition, will not be present and available within the client's everyday social milieu, may be unable to develop sufficient rapport for any test administration or interpretation that is representative in spite of apparent cooperation and test responsiveness. The development of genuinely task-oriented assessment relationships with Native Americans is difficult to

accomplish for any Anglo American professional who is a stranger. The assessor will typically not realize that the test information obtained is not useable. As a result, information on family/self, spirituality/religion, social/recreation, and training/education preferences may be obtained more readily in an interview format as Sidney Brown has done as part of alcohol counseling.

Caveats

There is the danger that the above synopsis of cultural orientation assessment may sound glib and lead one to believe that assessor cultural competence is simply a matter of assessment technology. Cultural competence in assessment for an Anglo-American assessor necessitates modes of thinking and understanding that are counter to our training and socialization as professional psychologists. We are an elite profession with roots in practice with our own kind that involves ethical attitudes and a focus on financial remuneration that often runs counter to practices in other cultures with their indigenous practitioners. Cultural competence implies more than sensitivity to other cultures. There has to be an honoring of beliefs, perceptions, values, language and ethical systems that are alien to our own world view and an ability to step back from our own stereotypes and biases in order to see the person in the cultural context. These few paragraphs describe an emergent technology that should be applied with caution as part of a developing understanding of other cultures (Dana, 1992).

References

- Dana, R.H. (1992). Multicultural assessment perspectives for professional psychology. Boston, MA: Allyn & Bacon.
 Stephens, J.D. (1992). Assessing ethnic minorities. SPA Exchange, 2(1), 4-5.